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Rapid Growth in Populous Areas

DURING the 1950's, as in the decades immediately preceding, the more populous areas of the United States experienced the most rapid population growth. This pattern prevailed in every section of the country, as may be seen in the table on page 2; the figures are shown according to population size of counties in 1950.

In the predominantly rural counties—those with less than 25,000 inhabitants—the population increased only 0.9 percent in the past decade. A substantially greater gain, 11.4 percent, was recorded by the next larger group of counties (25,000-49,999). The most marked growth occurred in the counties with 100,000-199,999 population in 1950, where the increase amounted to 33.6 percent. In the largest counties—those with 200,000 or more residents—the rise was 22.6 percent.*

Particularly rapid has been the growth in the more populated areas of the West. In that region, the two groups of counties with over 100,000 inhabitants in 1950 increased their population by more than 45 percent in the decade. Actually, each of the five groups of counties, irrespective of size, recorded a greater relative population increase in the West than in any other region. The Mountain States merit special mention. Counties with 100,000-199,999 residents in this geographic division experienced a gain of 84.0 percent; in the next larger and in the next smaller group of counties the increase was about 50 percent.

In the South, too, population growth was quite rapid in the larger counties (100,000 or over). However, it was below the national average in the smaller ones. In fact, the counties with less than 25,000 residents actually lost population between 1950 and 1960. This loss was concentrated mainly in the South Central divisions and in West Virginia. The latter State, as well as Arkansas, Oklahoma, and all four East South Central States apparently have been experiencing a considerable migration out of their rural areas. Simi-

*This sizable growth in the larger counties contrasts sharply with the decrease in population which occurred in most large cities of the Northeast and Midwest. For a discussion of recent population trends in large cities, see *Statistical Bulletin*, March 1961, page 3.

lar population losses have been sustained by the Plains States in the North.

The variation in relative population growth with size of county was smaller in the Northeast than elsewhere in the country, the increases ranging from 20 percent in the larger counties (100,000-199,999) to 4 percent in those with fewer than 25,000 residents. In all groups of counties except the least populous, the population increases in the Northeast

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POPULATION CHANGE BY SIZE OF COUNTY

United States* by Geographic Area, 1950 to 1960

Area	All Counties	Counties Classified by Size of Population in 1950				
		200,000 or More	100,000-199,999	50,000-99,999	25,000-49,999	Under 25,000
	Population (Thousands)					
UNITED STATES						
1950	151,197	68,730	17,302	18,207	22,653	24,304
1960	179,097	84,261	23,112	21,975	25,225	24,523
	Percent Change, 1950 to 1960					
UNITED STATES	18.5	22.6	33.6	20.7	11.4	0.9
Region						
Northeast	13.2	12.2	20.3	15.8	9.4	4.2
North Central	16.1	19.7	31.1	21.7	13.4	— .4
South	16.5	30.3	41.7	18.1	7.1	— .4
West	38.7	45.9	46.9	36.5	29.5	10.7
Geographic Division						
New England	12.8	11.9	18.0	18.0	11.0	— .4
Middle Atlantic	13.3	12.2	20.9	14.9	8.6	8.4
East North Central	19.2	19.7	33.3	22.1	12.7	3.3
West North Central	9.5	20.0	21.0	19.4	14.5	—2.4
South Atlantic	22.6	26.5	47.5	21.9	14.9	7.4
East South Central	5.0	22.5	25.2	7.6	—1.0	—6.5
West South Central	16.6	40.9	35.1	20.5	4.7	—4.1
Mountain	35.1	50.7	84.0	49.9	43.6	8.9
Pacific	39.9	45.4	39.1	28.6	14.8	15.9

*Excludes Alaska.

Note: Minus sign (—) denotes decrease.

Source: Computed by the Statistical Bureau of the Metropolitan Life Insurance Company from final counts of the 1960 Census of Population, Bureau of the Census, Series PC(1)-A.

were below the averages for the country as a whole.

The population of the United States is increasingly being concentrated in those areas which already have the largest number of residents. As the table shows, the counties with 200,000 or more population in 1950 contained 68,730,000 people, or 45 percent of the total population. By 1960, the population of the same counties was 84,261,000, or 47 percent of the total.

Death Claim Payments Exceed $568,000,000 in 1960

Two major trends characterize the death claim payments made by the Metropolitan Life Insurance Company in the past 20 years. The amounts paid to beneficiaries have risen year after year, reflecting both the growth in number of policyholders and the larger amounts of Life insurance owned by them. Secondly, an increasing percentage of the claim payments have been on deaths from chronic disease, particularly heart disease and cancer—largely a result of the general downward trend in mortality from acute disease and of the rise in the proportion of policyholders at the older ages.

During 1960, the Company paid $568,391,000 in death benefits on Ordinary, Group, and Industrial Life insurance policies. This sum exceeded by about $41,200,000 the claim payments in 1959, and was more than 3 times the amount disbursed 20 years ago.

As the table on page 4 shows, heart disease accounted for more than $2 out of every $5 paid in death claims in 1960. The actual amount disbursed for this cause totaled more than $248,000,000, of which about $151,000,000 was for deaths attributed to coronary artery disease. Vascular lesions of the central nervous system (mainly cerebral hemorrhage) were responsible for claim payments of somewhat over $41,000,000. For the cardiovascular-renal diseases as a group, the Metropolitan disbursed in excess of $309,000,000 last year. This sum, which accounted for 54.4 percent of the total claim payments, exceeded by at least $50,000,000 the disbursements on deaths from all other causes combined. Two decades ago, 46.6 percent of the payments were for the cardiovascular-renal diseases.

The beneficiaries of policyholders who died of cancer (malignant neoplasms) were paid nearly $116,000,000 last year, or slightly more than one fifth of the total claim disbursements; in 1940, the proportion was one seventh. For the past few years, cancer and the cardiovascular-renal diseases have accounted for $3 out of every $4 paid in claims.

The relatively heavy toll of life taken by accidents is reflected in the amount of death benefits paid on account of this cause. In 1960,

AMOUNTS DISBURSED ON ACCOUNT OF DEATHS FROM SELECTED CAUSES

Entire Experience of the Metropolitan Life Insurance Company, All Ages
1960, 1959, and 1940 Compared

Cause of Death	Amount Disbursed* (in Thousands)			Percent of Total		
	1960	1959	1940†	1960	1959	1940†
All Causes—Total	$568,391	$527,189	$175,010	100.0	100.0	100.0
Natural causes of death						
Diseases of the cardiovascular-renal system	309,499	288,181	81,450	54.4	54.7	46.6
Vascular lesions, central nervous system	41,266	39,967	12,477	7.3	7.6	7.1
Diseases of heart	248,205	229,217	56,770	43.7	43.5	32.5
Chronic rheumatic heart disease	7,429	7,438	‡	1.3	1.4	‡
Arteriosclerotic and degenerative heart disease	220,467	201,857	‡	38.8	38.3	‡
Diseases of coronary arteries	151,124	142,366	23,506	26.6	27.0	13.4
Hypertension with heart disease	12,837	11,174	‡	2.3	2.1	‡
Other diseases of heart	7,472	8,748	‡	1.3	1.7	‡
Hypertension without mention of heart disease	3,005	3,034	110	0.5	0.6	0.1
General arteriosclerosis	4,098	3,759	1,102	0.7	0.7	0.6
Other diseases of circulatory system	8,733	8,157	‡	1.5	1.5	‡
Nephritis and nephrosis	4,192	4,047	10,991	0.7	0.8	6.3
Malignant neoplasms	115,646	105,939	25,039	20.3	20.1	14.3
Pneumonia and influenza	11,718	9,217	6,684	2.1	1.8	3.8
Cirrhosis of the liver	8,914	8,231	1,933	1.6	1.5	1.1
Diabetes mellitus	7,738	7,103	5,251	1.4	1.3	3.0
Ulcers of the stomach and duodenum	4,629	4,047	1,974	0.8	0.8	1.1
Tuberculosis—all forms	2,167	2,139	7,416	0.4	0.4	4.2
Hernia and intestinal obstruction	2,096	1,853	‡	0.4	0.3	‡
Gastritis, duodenitis, enteritis, etc.	1,719	1,652	389	0.3	0.3	0.2
Diseases of the gallbladder and biliary ducts	1,470	1,632	‡	0.3	0.3	‡
Syphilis	994	1,013	2,132	0.2	0.2	1.2
Appendicitis	582	749	2,550	0.1	0.1	1.5
Complications of pregnancy, childbirth	195	283	670	¶	0.1	0.4
Acute poliomyelitis	111	217	119	¶	¶	0.1
Cerebrospinal meningitis	85	59	56	¶	¶	¶
Communicable diseases of childhood	22	18	123	¶	¶	0.1
External causes						
Suicide	10,884	9,335	4,736	1.9	1.8	2.7
Homicide	2,924	2,759	884	0.5	0.5	0.5
Accidents—total	51,621	50,501	15,876	9.1	9.6	9.1
Motor vehicle accidents	26,054	26,469	7,121	4.6	5.0	4.1

*Includes additional accidental death benefits.
†Not strictly comparable with 1960 and 1959 due to change in procedures of classifying causes of death.
‡Not available.
¶Less than 0.05 percent.
Note: Amounts for each year are on an incurred basis.

about $52,000,000, or 9.1 percent of the total, was disbursed for fatal accidents; slightly over one half of this amount was for injuries sustained in motor vehicle accidents. The Metropolitan also paid close to $11,000,000 to the beneficiaries of policyholders who committed suicide, and nearly $3,000,000 on insured persons who were the victims of homicide.

The elevated level of mortality from pneumonia and influenza in the past four years has produced a rise in the death benefits paid on these diseases. In 1960, such benefits were not far from $12,000,000, or 2.1 percent of the total disbursements; this was slightly higher than the proportion for each of the preceding three years, but appreciably below that for 1940 (3.8 percent).

Claim payments on deaths from acute poliomyelitis dropped sharply last year, totaling $111,000, compared with $217,000 in 1959. The principal communicable diseases of childhood—measles, scarlet fever, whooping cough, and diphtheria—were responsible for only $22,000 in claims, less than one fifth the amounts paid on these diseases two decades ago. Since 1940 large decreases have also occurred in disbursements on deaths from tuberculosis, appendicitis, and the complications of pregnancy and childbirth.

In 1960, the Company paid nearly $10,000,000 on Ordinary and Industrial policies which had been in effect less than one year. More than one half of this amount was on Life insurance in force less than three months.

Slightly over two thirds of the total death claim payments last year—no less than $385,000,000—were made to beneficiaries of policyholders who died before age 65. Approximately $277,000,000 of this amount was for deaths occurring at ages 45-64 and $108,000,000 for those prior to age 45. Payments on claims for policyholders who died at ages 65 and over totaled $183,000,000.

Accident Fatalities in Canada

ACCIDENTS currently are responsible for the loss of more than 9,000 lives a year in Canada. This is equivalent to a death rate of 54 per 100,000 population, or slightly higher than the rate of 52 per 100,000 recorded in the United States. Taking a relatively large toll at every period of life, accidents are by far the leading cause of death among children and young adults in Canada. Among males, they account for more than one third of all deaths at ages 1-4, for over half those at ages 5-14, and for no less than two thirds the total mortality at 15-24 years. Among females, accidental injuries cause about two fifths of all deaths at ages 5-9, and at least one fourth of the total at each of the other age groups under 25 years.

MORTALITY FROM LEADING TYPES OF ACCIDENTS IN CANADA

By Sex and Age, 1957-58

MALES			FEMALES		
Age Period (Years); Type of Accident	Average of Annual Death Rates per 100,000	Percent of Total at Each Age	Age Period (Years); Type of Accident	Average of Annual Death Rates per 100,000	Percent of Total at Each Age
All Ages			**All Ages**		
Total	80.5	100	Total	30.8	100
Motor vehicle	32.3	40	Motor vehicle	10.3	33
Falls	9.5	12	Falls	9.0	29
Drowning*	9.2	11	Fire and burns by other means	3.3	11
Transport, except motor vehicle	6.8	8	Drowning*	1.7	6
Fire and burns by other means	4.4	5	Poisoning†	1.1	4
1-4			**1-4**		
Total	52.8	100	Total	33.5	100
Motor vehicle	17.5	33	Motor vehicle	10.9	33
Drowning*	12.5	24	Fire and burns by other means	9.0	27
Fire and burns by other means	10.2	19	Drowning*	4.7	14
Falls	2.7	5	Falls	1.8	5
Poisoning†	2.4	5	Poisoning†	1.5	4
5-9			**5-9**		
Total	39.6	100	Total	19.1	100
Motor vehicle	18.7	47	Motor vehicle	11.0	58
Drowning*	10.9	28	Fire and burns by other means	3.2	17
Fire and burns by other means	3.3	8	Drowning*	2.6	14
Transport, except motor vehicle	2.0	5	Transport, except motor vehicle	0.6	3
Machinery	1.0	3	Falls	0.5	3
10-14			**10-14**		
Total	33.6	100	Total	11.5	100
Motor vehicle	12.1	36	Motor vehicle	5.5	48
Drowning*	8.9	26	Drowning*	2.8	24
Transport, except motor vehicle	3.4	10	Fire and burns by other means	1.2	10
Firearm	2.4	7	Transport, except motor vehicle	0.6	5
Fire and burns by other means	1.6	5	Firearm	0.5	4
15-19			**15-19**		
Total	82.7	100	Total	18.4	100
Motor vehicle	41.3	50	Motor vehicle	12.8	70
Drowning*	17.2	21	Drowning*	1.6	9
Transport, except motor vehicle	7.4	9	Fire and burns by other means	1.2	7
Firearm	4.6	6	Poisoning†	1.1	6
Machinery	2.8	3	Transport, except motor vehicle	0.8	4
20-24			**20-24**		
Total	108.4	100	Total	16.7	100
Motor vehicle	58.1	54	Motor vehicle	11.6	69
Drowning*	13.1	12	Fire and burns by other means	1.6	10
Transport, except motor vehicle	12.7	12	Poisoning†	1.1	7
Machinery	4.0	4	Drowning*	1.0	6
Firearm	3.0	3	Transport, except motor vehicle	1.0	6
25-44			**25-44**		
Total	79.0	100	Total	13.3	100
Motor vehicle	34.7	44	Motor vehicle	7.2	54
Transport, except motor vehicle	10.2	13	Fire and burns by other means	1.5	11
Drowning*	7.3	9	Poisoning†	1.2	9
Falls	4.4	6	Transport, except motor vehicle	1.1	8
Machinery	3.3	4	Drowning*	0.9	7
45-64			**45-64**		
Total	84.5	100	Total	24.3	100
Motor vehicle	34.3	41	Motor vehicle	11.9	49
Falls	10.1	12	Falls	3.5	14
Transport, except motor vehicle	7.9	9	Fire and burns by other means	2.7	11
Drowning*	6.5	8	Poisoning†	1.9	8
Fire and burns by other means	4.2	5	Drowning*	1.1	5
65 and over			**65 and over**		
Total	185.3	100	Total	140.7	100
Falls	76.8	41	Falls	102.2	73
Motor vehicle	60.4	33	Motor vehicle	20.6	15
Fire and burns by other means	12.5	7	Fire and burns by other means	7.9	6
Drowning*	7.5	4	Poisoning†	1.9	1
Transport, except motor vehicle	6.4	3	Transport, except motor vehicle	1.9	1

*Excluding deaths in water transportation, which are included in the category "Transport, except motor vehicle."
†Poisoning by solids, liquids, or gases.
Source of basic data: Reports of the Dominion Bureau of Statistics.

As the table on page 6 shows, the accident death rate among males is 2⅔ times that among females at all ages combined, the rates in 1957-58 being 80.5 and 30.8 per 100,000, respectively. Males suffer the higher death toll at every age group, with the greatest difference occurring in early adult life. At ages 20-24, the accident death rates for the two sexes were 108.4 and 16.7 per 100,000, respectively, a ratio of about 6½ to 1; the disparity was almost as great at ages 25-44.

The motor vehicle accident death rate in Canada is 21 per 100,000 population, on a par with that in the United States. Two out of every 5 Canadian males killed in accidents sustain their injuries in motor vehicle mishaps; among females, the proportion is 1 in every 3. At no age group among males do motor vehicle accidents account for less than one third the total number fatally injured, and in the age range 15-24 years such accidents are responsible for somewhat more deaths than all other types combined. Among females at these ages, motor vehicle accidents account for about 70 percent of all fatal accidental injuries. In each sex, the large majority of the victims of motor vehicle accidents are occupants of cars—drivers and passengers. Pedestrian fatalities occur chiefly at the childhood and the older ages. There are also a goodly number of deaths annually among bicyclists—mostly boys 5-14 years of age—who sustain injuries in collisions with motor vehicles.

Falls rank second as a cause of fatal injury among both males and females at all ages combined, although the mortality from this cause is largely concentrated at the older ages. Three fifths of the males and about nine tenths of the females killed in falls are 65 years of age or older. In 1957-58, the death rate from falls at these ages was 76.8 per 100,000 for males and 102.2 for females; at the earlier ages, however, males recorded the higher rates. A recent study by the Dominion Bureau of Statistics showed that the majority of fatal falls occur in the home, and that many of them are among elderly people walking about the house; in such instances, physical weakness or impairment is often a contributing factor.

Drowning, accounting for more than 900 fatalities a year — exclusive of those associated with water transportation—recorded a death rate of 5.5 per 100,000 in 1957-58, nearly twice the rate in the United States. The death toll from accidental drowning in Canada is about 5½ times as high among males as among females, the rates being 9.2 and 1.7 per 100,000, respectively, in 1957-58. Children and young adults are the main victims. The relative frequency of drownings among children 1-4 years of age is greater than at any other age except 15-24 years among males, and greater than at every

other age without exception among females. Drownings associated with water transportation—the bulk of them involving small boats—add about 300 deaths annually; the majority of such fatalities occur among males in the age range 15-39.

Other types of accidents also contribute appreciably to the death toll in Canada. As the table shows, fire and burns by other means rank fifth among males and third among females as a cause of accidental death; the mortality from such injuries is highest among young children and among older people, the groups least able to save themselves when a conflagration occurs. Accidents involving poisons (solids, liquids, or gases), firearms, and machinery are also among the leading types at various age groups.

Tuberculosis Being Wiped Out

SINCE the introduction of chemotherapy in the treatment of tuberculosis about a decade ago, the death rate from the disease in the United States has been decreasing at an accelerated pace. In 1960 the rate was at an all-time low of 6 per 100,000 population, or little more than one fourth that recorded only a decade earlier. Every section of the country and every segment of the population has shared in the gains.

The accompanying table shows the reduction in tuberculosis mortality according to color, sex, and age in the decade from 1946-48 to 1956-58, the latest years for which such data are available. Males, both white and nonwhite, recorded decreases of about 75 percent at all ages combined. Among white males the tuberculosis death rate fell from 36.2 per 100,000 in 1946-48 to 9.8 in 1956-58, and among nonwhite males from 99.2 to 24.2 per 100,000. Even more favorable has been the trend for females, the death rate from the disease dropping from 18.0 to only 3.3 per 100,000 among the white, and from 74.3 to 11.9 per 100,000 among the nonwhite. The tuberculosis problem is becoming increasingly concentrated in the male population. Currently, the mortality rate for males is 3 times that for females among white persons and twice that for females among the nonwhite.

In each color-sex group, the reductions in tuberculosis mortality during the decade were remarkably large in childhood and early adult life. For example, among white males the decrease amounted to at least 85 percent at the ages under 15, and was no less than 95 percent at ages 15-24. Among white females the reduction in the latter age group was 97 percent—the rate falling from 14.9 per 100,000 in 1946-48 to only 0.5 in 1956-58. It is no exaggeration to say that tuberculosis in the United States has been practically eradicated as a

cause of death among white persons in the age range 1-24 years.

Beyond early adult life, the relative improvement in tuberculosis mortality decreased progressively with advance in age. Thus, among white men 65-74 years of age the reduction was slightly over 50 percent, and among white women at these ages it was 72 percent; at ages 75 and over the experience was less favorable. The downward trend in tuberculosis mortality was more gradual for nonwhite than for white persons at the more advanced ages.

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MORTALITY FROM TUBERCULOSIS BY COLOR, SEX, AND AGE

United States, 1956-58 and 1946-48

Age Period (Years)	Death Rates per 100,000		Percent Decrease in Death Rates	Percent Distribution of Deaths		Death Rates per 100,000		Percent Decrease in Death Rates	Percent Distribution of Deaths	
	1956-58	1946-48		1956-58	1946-48	1956-58	1946-48		1956-58	1946-48
	White Males					White Females				
All Ages.....	9.8	36.2	73	100	100	3.3	18.0	82	100	100
Under 1.....	1.2	9.4	87	*	1	1.2	9.3	87	1	1
1- 4.....	0.8	5.4	85	1	1	0.6	5.3	89	2	2
5-14.....	0.2	1.4	86	*	1	0.1	1.8	94	1	1
15-24.....	0.5	10.1	95	1	4	0.5	14.9	97	2	13
25-34.....	1.9	22.4	92	3	10	2.2	22.9	90	9	21
35-44.....	6.4	41.1	84	9	16	3.7	21.9	83	15	17
45-54.....	15.3	68.3	78	18	23	4.4	18.6	76	16	12
55-64.....	28.5	93.3	70	26	24	5.4	23.5	77	15	12
65-74.....	46.2	98.5	53	27	15	10.6	38.3	72	20	12
75 and over..	56.6	97.2	42	16	6	20.0	54.5	63	20	8
	Nonwhite Males					Nonwhite Females				
All Ages.....	24.2	99.2	76	100	100	11.9	74.3	84	100	100
Under 1.....	7.2	39.9	82	1	1	7.2	35.6	80	2	1
1- 4.....	3.5	22.6	85	2	2	3.9	20.3	81	4	2
5-14.....	0.6	9.1	93	1	2	0.7	12.2	94	1	3
15-24.....	4.0	81.3	95	3	14	6.2	115.3	95	8	28
25-34.....	17.8	120.6	85	10	19	17.9	127.8	86	22	29
35-44.....	32.6	154.4	79	16	22	19.4	88.6	78	21	17
45-54.....	56.5	192.6	71	24	20	19.1	76.1	75	16	10
55-64.....	81.7	178.1	54	22	12	22.5	64.2	65	12	5
65-74.....	112.3	154.2	27	16	6	31.9	65.7	51	9	3
75 and over..	89.2	131.8	32	7	2	29.6	48.6	39	5	1

*Less than 0.5.
Source of basic data: Reports of the National Office of Vital Statistics.

It is apparent from the table that an increasing proportion of the tuberculosis deaths are among persons at the older ages. In each color-sex group, the proportion of all tuberculosis deaths occurring at ages 65 and over has more than doubled in the decade under review, and they now account for two fifths of the total tuberculosis mortality among white persons.

Every State in the Union recorded a large decrease in tuberculosis mortality between 1946-48 and 1956-58. The reduction amounted to 75 percent or more in 34 States, and ranged from a low of 66 percent in Arkansas to 85 percent in Washington. Particularly noteworthy is the marked progress made in Arizona, where the rate dropped from 99.7 to 18.6 per 100,000.

The reported incidence of tuberculosis in the United States, like the mortality from the disease, is generally highest in the South and Southwest, and lowest in the Midwest. Preliminary data for 1959 indicate that the frequency of active and probably active cases reported ranged from 9 per 100,000 population in Nebraska and Utah to 65 in Arizona and 77 in the District of Columbia, the average being 33 per 100,000 population for the country as a whole.

The large degree of control gained over tuberculosis is one of the signal achievements of modern medicine and public health. Through the development and more intensive use of the newer methods of control which have already proved effective—particularly chemotherapy—tuberculosis can be virtually eradicated in the United States.

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Company's Exhibit at American Medical Association Meeting

Physicians attending the Annual Meeting of the American Medical Association in New York City, June 25-30, are cordially invited to visit the Metropolitan Life Insurance Company booth in the Scientific Exhibit (Space 2228). The Company's exhibit,

BLOOD PRESSURE: INSURANCE EXPERIENCE AND ITS IMPLICATIONS

is based primarily on data derived from a study by the Society of Actuaries. New information will be presented on average systolic and diastolic blood pressure levels among insured men and women according to age at the time of examination for insurance, and on the relation of elevated blood pressure levels to longevity.

MORTALITY FROM SELECTED CAUSES

Industrial Policyholders, Metropolitan Life Insurance Company
March 1961

Cause of Death	Annual Rate per 100,000 Policyholders*				
	March		Year to Date		
	1961	1960	1961	1960	1959
All Causes	764.1	801.2	744.6	762.9	707.7
Tuberculosis (all forms)	5.5	7.4	6.2	6.5	6.1
Communicable diseases of childhood	0.1	0.3	0.1	0.1	0.2
Acute poliomyelitis	—	—	0.1	0.1	†
Malignant neoplasms	160.5	155.9	150.9	150.4	143.9
Digestive system	52.6	52.3	48.3	50.1	49.2
Respiratory system	23.9	24.4	23.8	22.2	21.7
Diabetes mellitus	16.0	19.9	16.1	18.0	15.5
Diseases of the cardiovascular-renal system	418.4	431.5	409.6	412.9	386.8
Vascular lesions, central nervous system	75.9	84.0	75.2	77.3	75.6
Diseases of heart	311.5	316.1	303.8	305.9	282.6
Chronic rheumatic heart disease	13.0	13.2	12.7	13.3	11.6
Arteriosclerotic and degenerative heart disease	253.0	252.4	245.3	244.3	225.7
Diseases of coronary arteries	145.9	146.6	144.5	141.3	137.1
Hypertension with heart disease	33.6	35.6	33.2	34.4	33.1
Other diseases of heart	11.9	14.9	12.5	13.9	12.3
Nephritis and nephrosis	7.9	8.3	6.9	8.0	7.9
Pneumonia and influenza	21.7	43.3	22.3	35.9	21.2
Complications of pregnancy, childbirth	1.3	0.7	0.8	0.6	0.9
Suicide	6.9	6.8	6.8	6.3	6.6
Homicide	2.8	2.9	2.8	3.3	3.0
Accidents—total	31.0	30.4	31.7	31.6	32.5
Motor vehicle	13.9	11.7	13.6	13.7	13.8
All other causes	99.9	102.1	97.2	97.2	91.0

*These death rates relate to persons insured under Weekly or Monthly premium-paying Industrial policies and Monthly premium-paying Ordinary policies for small amounts of insurance.

†Less than 0.05.

Note: Rates for 1960 and 1961 are provisional.

Correspondence relating to the BULLETIN may be addressed to:

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1 Madison Avenue, New York 10, N. Y.

Please notify us promptly of any change of mailing address.

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